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**\*BIBDATASHEET\*****CONFIRMATION NO. 8343**

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/759,328	<b>FILING OR 371(c) DATE</b> 01/16/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1633	<b>ATTORNEY DOCKET NO.</b> USF-T144XCZ1	
<b>APPLICANTS</b> Said M. Sebti, Tampa, FL;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/506,219 09/25/2003 and is a CIP of 10/049,502 02/15/2002 which is a 371 of PCT/US01/19432 06/18/2001 which claims benefit of 60/212,049 06/16/2000					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 04/21/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 19	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 23557					
<b>TITLE</b> RhoB as a suppressor of cancer cell growth, cell transformation, and metastasis					
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *OK*

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 which claims benefit of 60/212,049 06/16/2000

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 04/21/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FL	SHEETS DRAWING 19	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
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Verified and Acknowledged  
 Examiner's Signature *[Signature]* Initials *mm*

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TITLE  
 RHOB AS A SUPPRESSOR OF CANCER CELL GROWTH, CELL TRANSFORMATION, AND METASTASIS

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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